PUBLIC AND TRIBAL NOTICE

Wyoming Department of Health

Proposed Amendment to Medicaid Care Management Entity 1915(b) &(c) Waiver

Public and Tribal notice is hereby given that the Wyoming Department of Health (WDH) intends to submit an amendment to its current 1915 (b) & (c) Care Management Entity (CME) Waiver, entitled Wyoming Medicaid's Youth Initiative-A High fidelity wraparound (HFWA) Community-Based Alternative for Youth with Serious Emotional/Behavioral Challenges (WY-01), on March 26th, 2018. The amendment is necessary to adjust the agreed upon rate and reimbursement paid by the WDH to the CME contractor and the fee for service payments made to direct service providers.

Administration: Will not change.

Eligibility: Will not change.

Services: Will not change.

Payment: Will change.

<u>Changes in Method and Standards:</u> Will change. The capitated payment amount currently made to the contractor for each CME enrolled youth will move from a risk-based capitated per member per month payment to a non-risk per diem with a straight pass through fee for service reimbursement for all direct services. The WDH will reimburse the contractor for the direct services provided through its provider network in accordance with the Wyoming Medicaid fee schedule rates.

State Rationale for Proposed Changes:

The WDH, Division of Healthcare Financing (DHCF), is the State appointed entity for administration of Wyoming's Medicaid program and has procured a statewide CME for youth with complex behavioral conditions. The CME supports WDH's efforts to better serve youth in their homes and communities by providing the necessary services and supports. The state's contract with the CME outlines ten specific performance measures that relate to eligible youth with behavioral health needs so that each youth and their family can achieve goals of safety, permanency, and well-being in their communities using high fidelity wraparound (HFWA). Due to the small number of program enrollees and the freedom for each program enrollee to select various direct services, the variation from enrollee to enrollee in the selection and utilization of available services cannot be adequately supported through a full-risk capitated payment arrangement without significant financial risk to both the contractor and the WDH. Moving to a non-risk payment methodology reduces the opportunity for significant annual variation in calculated rates due to the variances experienced with the uptake and utilization of program services.

Proposed Implementation Timeline:

Effective July 1, 2018 through June 30, 2019, payment rate made by the WDH to the CME contractor will change. The payment will no longer be a capitated risk-based per member per month payment, but will be a non-risk per diem payment supplemented by fee for service reimbursement of direct services provided to program enrollees.

Fiscal Impact:

State - None.

Federal – None.

Conference Calls:

The State will host two conference calls, one on **Friday, March 2nd, 2018, 11am to 12pm** and the second call will be held on **Monday, March 5th, 2018, 3pm to 4pm** to address questions or comments associated with this waiver a mendment submission. Please use the following information to join:

Phone: 1-877-278-2734 PIN: 638642

Comments may also be submitted in writing to the following address or email by **Friday, March 9th, 2018**. Please submit any questions in writing to the following address:

Lisa Brockman
Division of Healthcare
Financing, Medicaid 6101
Yellowstone Road, Suite 210
Cheyenne, WY 82002
307-777-7326
Lisa.Brockman@wyo.gov

A copy the current 1915(b) & (c) waiver amendment submitted will be available on line at http://health.wyo.gov/healthcarefin/medicaid/home.html. Paper copies may be obtained directly from the Department of Health, Division of Healthcare Financing. To obtain a copy of the document, contact:

Lisa Brockman
Division of Healthcare
Financing, Medicaid 6101
Yellowstone Road, Suite 210
Cheyenne, WY 82002
307-777-7326
Lisa.Brockman@wyo.gov

Dated this 26th day of February, 2018.